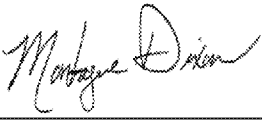
 United States Environmental Protection Agency Washington, DC 20460		<input type="checkbox"/> Registration <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Other	OPP Identifier Number
Application for Pesticide - Section I			
1. Company/Product Number 100-1623		2. EPA Product Manager Mindy Ondish	
4. Company/Product (Name) A21472 Plus VaporGrip™ Technology		3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted	
5. Name and Address of Applicant (Include ZIP Code) Syngenta Crop Protection, LLC P. O. Box 18300 Greensboro, NC 27419 <input type="checkbox"/> Check if this is a new address		6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. _____ Product Name _____	
Section – II			
<input checked="" type="checkbox"/> Amendment - Explain below. <input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> Resubmission in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application. _____ <input type="checkbox"/> Notification - Explain below. <input type="checkbox"/> Other - Explain below. _____			
Explanation: Syngenta Crop Protection LLC, is submitting a label amendment to A21472 Plus VaporGrip® Technology (EPA Reg. No. 100-1623). This product, herein referred to as "Tavium", is marketed under the alternate brand name Tavium® Plus VaporGrip® Technology. The purpose of this label amendment is to change the directions for use removing the December 20, 2020 automatic expiration and subsequent prohibition of use after this date. PRIA category R350, PRIA fee of \$13,888, 9 months review time.			
Section – III			
1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*Certification must be submitted</i>	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" No. per Unit Packaging wgt. Container	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" No. per Unit Packaging wgt. container	2. Type of Container <input checked="" type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container	
		5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner in Which Label is Affixed to Product		<input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled <input checked="" type="checkbox"/> Other <u>Pressure Sensitive</u>	
Section – IV			
1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Montague Dixon		Title U.S. Regulatory Portfolio Lead, Herbicides Telephone No. (Include Area Code) (336) 632-7055	
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			6. Date Application Received (Stamped)
2. Signature 		3. Title U.S. Regulatory Portfolio Lead, Herbicides monty.dixon@syngenta.com	
4. Typed Name Montague Dixon		5. Date 8/12/2020	